SUMMONS FOR DOCUMENTS DOCKET NUMBER		ER	Trial Court of Massachusetts District Court Department		
SESSION: CRIMINAL JURY		NAME AND	D ADDRESS OF COURT DIVISION	YOU MUST	
NAME, ADDRESS AND ZIP CODE OF DEFENDANT		QUINC'	QUINCY DISTRICT COURT		
COMMONWEALTH			1 DENNIS RYAN PARKWAY		
	•		Y, MA 02169	ADDRESS ON	
		COINC	1, WA 02 109	THE DATE AND TIME	
V.		DATE AND	DATE AND TIME OF APPEARANCE		
			AT	HEREIN	
		3/16/11			
		DA	ATE TIME		
NAME, ADDRESS AND ZIP COD	E OF WITNESS	OFFENSE((S)		
Mai Ngoc Tran c/o William A. Hinton State Lab. Institute 305 South Street Jamaica Plain, MA 02130		Conspiracy Poss. Elect Poss. Class	Dist. Class B Conspiracy Poss. Electric Stun Gun Poss. Class E Poss. To Distribute Class D		
	UTHORIZED TO SERVE CRIMIN				
You are hereby commanded to forthwith serve the annexed summons upon the defendant or witness named within by delivering it to the defendant or witness personally, or by leaving it at the dwelling house or usual place of abode of the defendant or witness with some person of suitable and discretion then residing therein, or by mailing it to the last known address of the defendant or witness. NOTE: A summons for a witness may also be served by any person authorized to serve a summons in a civil action. See Rule 17(d)(1) of the Massachusetts Rules of Criminal Procedure. To the above named Witness: You are hereby required in the name of the Commonwealth, to make your appearance before the Justices of the Court on the date and time noted above, and to appear from time to time and day to day thereafter as ordered. You are further required to bring with you: PLEASE CONTACT ADVOCATE, at 617-769-6100 TO CONFIRM YOUR APPEARANCE. THANK YOU.					
WITNESS:	,		5,112 31 16332		
T) su	in R. Kenling		2/14/11		
Willian	n R. Keating, District Attorney				
□ Delivering a copy of □ Leaving a copy of it a person of suitable age ar □ Mailing a copy of it	RETURN O and the within summons upon the fit personally to the defendant at the dwelling house or usual and discretion residing therein, to the last known address of the thouse on DATE RECEIVED	or witness. place of abode ne defendant or	e of the defendant or witness v	vith	
				•	
DATE OF SERVICE	SIGNATURE OF PERSON MAKI	NG SERVICE	TITLE OF PERSON MAKING SERV		
2/14/11	Laura Martin		Assistant District Attorne	∋y	